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ABSTRACT

This document notes that counselors are increasingly called upon to develop activities intended to prevent rather than remediate. It describes a model by which counselors can systematically develop, implement, and then evaluate a preventive intervention, and it suggests that the most beneficial approach is group planning with the involvement of all school-related persons. Included at each step of the planning model are examples of previously developed plans. The 10-step procedure for the planning of primary prevention interventions presented in this document is based on George Albee's incidence formula in which Albee saw the occurrence of mental illness as related to the six components of organic factors, stress, exploitation, coping skills, self-esteem, and support groups. For each step in the 10-step process, the explicit task of the step is identified and three examples of the step are given. Examples are from interventions for enhancing the mental health of primary students from low-income families, at-risk students attending an inner city high school, and elementary teachers of students at-risk. References are included; additional materials are appended. (NB)

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Creating a Preventive School

ED 363 841

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Abstract

Counselors are increasingly called upon to develop activities intended to prevent rather than remediate. Described is a model by which counselors can systematically develop, implement, and then evaluate a preventive intervention, and it is suggested that the most beneficial approach is group planning with the involvement of all school-related persons. Included at each step of the planning model are examples of previously developed plans.

Introduction

This ten-step procedure for the planning of primary prevention interventions has its base in the work of George Albee, a University of Vermont psychologist. In an early work (Albee, 1959), he found himself gathering information on the needs and resources in the area of mental health, and as time passed and evidence accumulated, he concluded that the emotional and behavioral problems of society far exceed the resources available to treat them (Albee, 1983). Faced with these facts, Albee (1983) admits that he had to look beyond the current types of treatment, and he found an alternative in the concept and practices of primary prevention.

The nature of the primary prevention effort is contained in The Report of the Task Panel on Prevention of the President's Commission on Mental Health (Task Panel on Prevention, 1984), and it consists of four very distinct characteristics:

> (1) Most fundamentally, primary prevention is proactive in that it seeks to build adaptive strengths, coping resources, and health in people; not to reduce or contain manifest deficit.
>
> (2) Primary prevention is concerned about total populations, especially including groups at high risk; it is less oriented to individuals and to the provisions of services on a case-by-case basis.
>
> (3) Primary prevention's main tools and models are those of education and social engineering, not therapy or rehabilitation, although some insights for its models and programs grow out of the wisdom derived from clinical experience.
>
> (4) Primary prevention assumes that equipping people with personal and environmental resources for coping is the best of all ways to ward off maladaptive problems, not trying to deal (however skillfully) with problems that have already germinated and flowered). (pp. 8-9)

The basis of the ten-step model used in this article is Albee's incidence formula. In this formula, Albee (1982, 1985) states that the occurrence of mental illness is related to six components:

$$\text{Incidence} = \frac{\text{Organic Factors} + \text{Stress} + \text{Exploitation}}{\text{Coping Skill} + \text{Self-Esteem} + \text{Support Groups}}$$

Within the formula, organic factors are defined as disease states, disease causes, or behaviors that contribute to disease or illness (e.g., smoking, drinking of alcoholic beverages, poor nutrition, excessive use of caffeine, drug abuse, poor sleeping habits, etc.). Stress is conceptualized as sources of threat, feelings of powerlessness, and excessive demand on personal resources, and reduction of stress "...requires changes in the physical and social environments" (Albee, 1982, p. 1046). Exploitation represents the use or abuse of someone for another's selfish advantage. Coping skills are social and cognitive abilities that enable an individual to deal with life's problems and, as a result, "...reduce the incidence of frustration and emotional disturbance" (Albee, 1982, p. 1047). Self-esteem is an individual's level of valuing of him/herself. This can be positively influenced by a person's coping abilities and by his/her support system. And, support groups are those individuals, and/or formal or informal groups of individuals, who comprise a person's external source of self-esteem, coping, and growth. Obviously, from the formula, if a reduction in organic factors, stress, and/or exploitation occurs in a person's life, then the incidence of mental illness/emotional disturbance will decrease. Likewise, if an increase in coping skills, self-esteem, and/or support groups can occur, then the incidence will also decrease. From a mathematical and practical point of view, the reduction of any component of the numerator will have positive effects, as will the enhancement of any component of the denominator.

After realizing the power in the preceding incidence formula, it is appropriate to look at the concept and practice of group planning for primary prevention. Support for use of a group in planning comes from several points Dickel (1991): (1) Groups, rather than individuals, make better decisions and choices, because they can take more perspectives into

consideration. (2) Use of groups from within a community can create ownership in the plan and increase the likelihood that it will be a successfully implemented. (3) When group members understand the concept of primary prevention and the components of Albee's formula, there is a higher likelihood that they will implement the plan with enthusiasm. And, (4) Groups that have representation from the local community (school, institution, or actual community) will begin to insure that local needs addressed. In addition, these points are supported by Davis (1982) as he states that "participation in intervention design by members of the population providing the focus for change may assist in assuring that interventions reflect local diversity" (p. 431).

Thus, this ten-step process is a combination of the Albee formula and the belief that group planning can combine to produce a meaningful and legitimate intervention intended to reduce the incidence of some problematic situation in a given community, whether that community be as small as a family, or larger such as a classroom, or even larger as in a school or congregation or business, or even in a large community. To create a preventive school, this model is introduced to a team that is representative of all segments of the school, teachers, staff, students, parents, and administrators. They learn together of the power of the model, and then they work through each step in the planning process in order that all might contribute ideas and all will have ownership of the process and the plan.

The following description of the ten-step process contains not only the explicit task of each step but also three examples for each step. The first example comes from Burchette, Collins, Hartman, and McNeal (1991) and concerns an intervention for enhancing the mental health of primary students from low income families. The second example comes from Brown (1991) and involves an intervention for enhancing the mental health of at-risk students attending an inner city high school, and the third example is a plan by Groff, Byrd, and Pfeffer (1991) for enhancing the mental health of elementary teachers of students at-risk.

The Ten-Step Format

STEP I

DESCRIBE IN WRITING THE POPULATION FOR WHOM YOU WISH TO PLAN A PREVENTION INTERVENTION.

The process of definition will be easier if the following questions are answered: (1) Who, specifically, is the group that is to be the target of the intervention? And, (2) What are all the characteristics of this group? However, before answering these specific questions, a very serious needs assessment might be attempted. In the case of a desire to work with children, it might be helpful to consider Baker and Shaw's (1987) definition of "at risk", for "to be at risk means that a particular child or group of children presently faces a situation that holds potential for disrupting, delaying, or otherwise interfering with normal learning or development" (p. 191). Here, Baker and Shaw (1987) stress the importance of having a purpose or reason for identifying children who are at risk, and they point to specific characteristics that might lead a preventive intervention. The objective of this step is to clearly delineate a target population for the intervention and to identify at least some of the characteristics that are of concern.

EXAMPLE #1: An Elementary School Intervention

STEP I: Describe in writing the population for whom you wish to plan a prevention intervention.

The target area of intervention is primary students from low income environments.

EXAMPLE #2: A Secondary School Intervention

STEP I: Describe in writing the population for whom you wish to plan a prevention intervention.

At Risk Students attending an inner city high school.

EXAMPLE #3: An Intervention for Elementary Teachers

STEP I: Describe in writing the population for whom you wish to plan a prevention intervention.

This plan is for elementary teachers of students at-risk.

STEP II

LIST THE ORGANIC FACTORS (ILLNESSES, HEALTH HABITS, ETC.) THAT CAN PLAY A ROLE IN CAUSING EMOTIONAL OR BEHAVIORAL PROBLEMS IN THIS POPULATION.

In completing STEP II, it will be helpful if the following questions are dealt with in a systematic manner: (1) What are the physical health habits (i.e., substance abuse, smoking, lack of exercise, lack of sleep, etc.) that may contribute to wear and tear on the bodies of the specified group? And, (2) What are the dietary trends/habits (poor nutrition, excessive caffeine, excessive sugar intake, excessive fat intake, etc.) that may contribute to wear and tear on the bodies of member of the specified group? Here, it can be assumed that organic factors are disease states, disease causes, or behaviors that contribute to disease or illness. Completion of this step will assist in the development of goals, objectives, and procedures for STEP VIII.

EXAMPLE #1: An Elementary School Intervention

STEP II: List the organic factors (illnesses, health habits, etc.) that can play a role in causing emotional or behavioral problems in this population.

Abuse and neglect
Hyperactivity
Attention Deficit Disorder (A.D.D.)
Poor nutrition
Inadequate sleeping habits
Inadequate exercise
Fetal alcohol syndrome
Crack babies
Childhood disease
Tourette syndrome
Emotional disorder
Behavior disorder
Inadequate clothing

EXAMPLE #2: A Secondary School Intervention

STEP II: List the organic factors (illnesses, health habits, etc.) that can play a role in causing emotional or behavioral problems in this population.

Substance abuse (Cooney, 1986, p. 13)

Poor Nutrition
Isolation
Alienation, Anger

EXAMPLE #3: An Intervention for Elementary Teachers

STEP II: List the organic factors (illnesses, health habits, etc.) that can play a role in causing emotional or behavioral problems in this population.

Fatigue from caring for children above and beyond educational matters.
Fatigue from having to cope with teaching and emotional demands.
Physical illness associated with contagious childhood diseases.
Poor nutrition.
Lack of exercise.

STEP III

LIST THE SOCIAL AND ENVIRONMENTAL STRESS EVENTS AND CIRCUMSTANCES THAT ARE LIKELY TO IMPINGE ON THE LIVES OF PEOPLE IN THIS POPULATION.

There are numerous kinds of stressors and many kinds of stress. Stressors are sources of threat, situations that precipitate feelings of powerlessness, and excessive demands on personal resources. Individuals are susceptible to various kinds of stress depending on their unique personality.

Albee (1988) points out that

> Reducing stress may require changes in the physical and social environment. Environmental stress situations involve a whole complex of interacting variables. Some forms of social stress are a product of deeply ingrained cultural values and ways of life that are not easily susceptible to change. (p. 20)

For this section of the planning worksheet, the following questions may help: (1) What are the intrapersonal and interpersonal circumstances that may be causing stress in the members of this group? And, (2) What are the environmental circumstances and conditions that may be causing stress in the members of this group? Completion of this step will assist in the development of goals, objectives, and procedures for STEP VIII.

EXAMPLE #1: An Elementary School Intervention

STEP III: List the social and environmental stress events and circumstances that are likely to impinge on the lives of people in this population.

Divorce
Abuse
Neglect
Single parent families
Poverty
Low income
Parent going to jail/prison
See the following. Tables 1, 2, and 3

TABLE 1: POTENTIAL STRESSORS IDENTIFIED BY TEACHER*

*Source: Blom, G. E., Cheney, B. D., & Snoddy, J. E. (1986). Stress in childhood. New York: Teacher College Press.

School tests
Teacher behavior
Peer pressure
Sports competition
Physical abuse
Psychological abuse
Accident/injury
New teacher
Substitute teacher
Student teacher
Adverse publicity about school
Inappropriate school placement
Parental pressure to achieve
Child/teacher conflict
Dentist/doctor visit
Punishment/Rewards
Alcoholic parent
Mental illness in family
Parent's loss of job
Special events-birthdays
New family member
New parent
Physical appearance
Undiagnosed physical problem
Relations among school staff
Tension between parent/school staff
Tardiness/absence
Confusion about directions at school
Fears about fires, tornados
Religious indoctrination
Relations with peers
Ethnic/religious discrimination
Divorce
Death of parent
Holidays
Moving
Poverty
Academic pressure
Chronic illness
Reassignment of teacher
New school
Losing something
Homework
Criticism
Teasing
Family life style
Noise levels
Nuclear threat
Being labeled
Rules

TABLE 2: POTENTIAL STRESSORS OF ELEMENTARY AGE CHILDREN, BY LOCATION*

*Source: Blom, G. E., Cheney, B. D., & Snoddy, J. E. (1986). Stress in childhood. New York: Teacher College Press.

HOME
Death of a sibling
Discovery of being adopted
Change in father's job
Parents being away
Loss of job by parent
Death of a grandparent
Change in parental finances
Mental illness in family
Sibling competition
Death of parent
Jail sentence of parent
Increase in number of parental arguments
Mother beginning work
Serious illness of sibling
Sibling leaving home
Decrease in arguments with/between parents
Special events
Poverty
Physical abuse
Divorce of parents
Marriage of parent
Birth of a sibling
Increase in number of arguments with parents
Addition of third adult to the family
Pregnancy in unwed teen sister
Alcoholic parent
Psychological abuse
Having regular chores at home
Separation of parents

SCHOOL
Beginning school
Not making "100"
Poor report card
Teacher behavior
Substitute teacher
Relations among parents - school staff
Child/teacher conflict
Failure of a grade
Suspension
Ridiculed in class
Wetting in class
New teacher
Relations among school staff
Homework
Being labeled
Move to new school
Giving class report
Sent to principal
Tests
Reassignment of teacher
Adverse publicity about school
Tardiness/absence
Parental pressure to achieve

NEIGHBORHOOD

Losing a game
Family life style
Death of a close friend
Picked last on a team
Becoming a member of a church
Peer pressure
Change in acceptance by peers

ANY LOCATION

Caught in theft
Acquiring physical deformity
Going blind
Losing something
Suspected of lying
Criticism
Scary dreams
Getting lost
Accident/injury
Holidays
Outstanding achievement
Sex relationships/questions
Having a visible congenital deformity
Physical motivation
Punishment/rewards

TABLE 3: DOMAINS OF BEHAVIORAL REACTIONS*

*Source: Blom, G. E., Cheney, B. D., & Snoddy, J. E. (1986). Stress in childhood. New York: Teacher College Press.

FEELING	THINKING	ACTION	BODY RESPONSE
Crying	Daydreaming	Overly compliant	Physical complaint
Temper tantrums	Distractable	Tardy	Tic
Shyness	Low academics	Lingering after school	Hyperactive
Fearful	Short attention	Truant	Headache
Lonely	Not following directions	Stealing	Wetting
Fighting	Confusion	Provokes punishing	Soiling
Low self-confidence	Overachieves	Teasing	Stuttering
Sadness	Reads poorly	Clowning	Frequent use of bathroom
Shame	Poor achievement	Withdrawal	Clumsiness
Quiet	Unfinished assignments	Overly dependent	Well-coordinated
Phobia	Nonsensical thoughts	Unkempt appearance	Well-groomed
Overly polite	Alert	Impulsive	Nail biting
Angers others	Good memory	Regression	Vomiting
Bravado	Concentrates	Natural	Nausea
Worry	Asks repetitious questions	Tolerates frustration	Sucks thumb
Overly modest		Responsible	
Moody		School absence	
Sense of humor		Overly polite	
Friendly		Helpful to others	
Nightmares		Running away	
Anxiety		Hiding	
Depression			
Stable mood			

EXAMPLE #2: A Secondary School Intervention

STEP III: List the social and environmental stress events and circumstances that are likely to impinge on the lives of people in this population.

Low socioeconomic status
Absence of a parent/family unit
Geographic isolation
Peer Pressure (Cooney, 1986, p. 10)
Fear of violence, domestic violence
Competition

Feelings of inadequacy
Living in a poor neighborhood (Leitenberg, 1977, p. 321)

EXAMPLE #3: An Intervention for Elementary Teachers

STEP III: List the social and environmental stress events and circumstances that are likely to impinge on the lives of people in this population.

Frustration
Overload
Pleaser/Type A Personalities
Guilt
Embarrassment
Despair/Inability to cope
Anger
Loss of ideal classroom/grief
Burn-out (Belcastro & Gold, 1983)

STEP IV

LIST THE SOURCES AND KINDS OF EXPLOITATION THAT MAY OCCUR IN THE LIVES OF PEOPLE IN THIS POPULATION.

Exploitation is defined as use or abuse for another's selfish advantage, and in the words of Albee (1988),

> This factor differs from the others in the formula in an important way. Variations in the degree or type of exploitation affect all the other variables in the model -- stress, coping skills, self-esteem, the nature and type of support groups available, and even the incidence of organic factors. Since exploitation encompasses all the other variables, as well as being something that itself, with its many faces, contributes to psychopathology, it needs to be considered in both its larger and its smaller sense. (pp. 20-21)

> Persons who are victims of exploitation in any of its myriad forms suffer serious emotional damage. The exploitation often involves the use of excessive power by the exploiter to force the victims to conform or to behave in ways that are degrading, demeaning, dehumanizing, and/or dangerous. Rape and sexual abuse of children are obvious examples of exploitation. But there are many other more subtle ways that people can be subject to daily humiliations. (p. 21)

> Damage done through exploitation -- economic, sexual, through the media, causes increased incidence of emotional pathology. The exploited groups are not responsive to exhortations or to other quick-fix solutions. Certain kinds of exploitation result in low self-esteem and become a kind of self-fulling prophecy. Feelings of powerlessness are a major form of stress. Preventive efforts may have to take the form of laws to ensure equal opportunity, public education, changes in the way the mass media portrays these groups, and in pervasive value system changes. (p. 21)

> A reduction in incidence also may be accomplished by developing feelings of competence -- better social coping skills, improved self-esteem, and solid support networks. (p. 21)

The following questions may be of help in addressing the assignment for this step: (1) Under what circumstances are the individuals in the specified group, or the group itself, used and/or abused in their domestic (home) setting? (2) Under what circumstances are the individuals in the specified group, or the group itself, used and/or abused in their school or employment setting? And, (3) Under what circumstances are the individuals in the specified group, or the group itself, used and/or abused in their community or larger culture? Completion of this step will assist in the development of goals, objectives, and procedures for STEP VIII.

EXAMPLE #1: An Elementary School Intervention

STEP IV: List the sources and kinds of exploitation that are likely to occur in the lives of people in the population.

Source	Kind
Teacher	1. Not recognizing individuality and teaching toward it. 2. A teacher can exploit a child emotionally through their teaching practices.
Friends & Peers	1. Friends make fun of or leave out child based on characteristics or factors not within the child's control. 2. Peer pressure 3. Daring one another to take part in inappropriate activities.
Family	1. Abuse & neglect 2. Sibling rivalry or pressure
Low socioeconomic	1. Low socioexpectation
Babysitter/Caregiver	1. Abuse & neglect

EXAMPLE #2: A Secondary School Intervention

STEP IV: List the sources and kinds of exploitation that are likely to occur in the lives of people in the population.

Source	Kind
Coaches (Dickel, 1991, p. 46)	Exploit physical ability in students for their own (the coach's) ego.
Teachers	Do not require enough because they think the students can't do it.
Peers	"Don't be a nerd."
Family	"Your father was a loser, you'll be a loser."
Self	Low self esteem : "I can't . . ."
Society	"You're not as good."

EXAMPLE #3: An Intervention for Elementary Teachers

STEP IV: List the sources and kinds of exploitation that are likely to occur in the lives of people in the population.

Source	Kind
Administration	lack of recognition, overload

Co-workers	lack of cooperation/recognition, high expectations
Profession	doesn't provide for time-management, salary -- doesn't reinforce effort
Parents	expectations, lack of cooperation
Community	lack of professional respect

STEP V

LIST THE SKILLS/ATTITUDES THAT WILL HELP THIS POPULATION COPE WITH, AND GROW IN, THEIR PARTICULAR LIFE SITUATION.

The concern at this step is with identifying behaviors and attitudes that not only help an individual cope (maintain the status quo) in his or her environment but also allow for growth. In the process of completing this step, the group should answer the following questions: (1) What behaviors are necessary for coping and growth in the life situation in which the specified group lives? And, (2) What attitudes are necessary for coping and growth in the life situation in which the specified group lives? Completion of this step will assist in the development of goals, objectives, and procedures in STEP XI.

EXAMPLE #1: An Elementary School Intervention

STEP V: List the skills that will help this population cope with, and grow in, their particular life situation (some of these skills may be attitudes).

Self esteem
Stress management
Relaxation
Communication
Patience
Leisure
Adaptability
Decision making
Problem solving
Social skills

EXAMPLE #2: A Secondary School Intervention

STEP V: List the skills that will help this population cope with, and grow in, their particular life situation (some of these skills may be attitudes).

Communication skills
Decision-making skills
Mobility
Employment skills
Education--Knowledge of support systems
Problem-solving skills
Respect for self and others

EXAMPLE #3: An Intervention for Elementary Teachers

STEP V: List the skills that will help this population cope with, and grow in, their particular life situation (some of these skills may be attitudes).

Possession of an optimistic attitude
High self-esteem
Scheduling/ prioritizing/ organizing/ time-management

> According to research cited in Time Management for Teachers,"Teachers who were trained in developing better schedules increased their instructional time by 23 to 34 minutes per day." (Collins, 1987, p. 59)

Team cooperation
Knowledge and use of coping strategies
Assertiveness
Patience
Flexibility/ Adaptability
Non-judgmental attitude

STEP VI

LIST THE ACTIONS THAT WILL HELP BUILD THE SELF-ESTEEM OF EACH PERSON IN THIS POPULATION.

> Coopersmith (1967) defines self-esteem as
>
> ...the evaluation which the individual makes and customarily maintains with regard to himself: it expresses an attitude of approval or disapproval, and it indicates the extent to which the individual believes himself to be capable, significant, successful, and worthy. In short, esteem is a personal judgement of worthiness that is expressed in the attitudes the individual holds toward himself. (p. 5)

In addition, Friedmann and Brooks (1990), in their program entitled BASE (Behavioral Alternatives Through Self-Esteem), present what they call the "self-esteem building blocks" (p. ix). These are "approval", "trust", "sense of power", "acceptance", "responsibility", "self-respect", "respect for others", "flexibility", "pride", and "self-importance" (Friedmann & Brooks, 1990, p. ix-x). Referring to this conceptualization of self-esteem, the following questions may helpful in defining the requested actions: (1) What skills could the individuals in the specified group acquire in order to feel more capable and successful? And, (2) What social supports could be put into place that would make the specified group feel more significant? Completion of this step will assist in the development of goals, objectives, and procedures in STEP IX.

EXAMPLE #1: An Elementary School Intervention

STEP VI: List the actions that will help build the self-esteem of each person in this population.

Child support groups
Conflict resolution
"Significant other" groups
Empowering to make decisions (Counseling)
Classroom guidance and counseling
"Caught You Doing Good"
Individualization
"Student of the Week"
Recognition of birthdays
Recognition of accomplishments outside of school

EXAMPLE #2: A Secondary School Intervention

STEP VI: List the actions that will help build the self-esteem of each person in this population.

Earning the required amount of credits to pass/graduate.
Obtaining, then holding, a job with a future.
Having and using a support system/network.
Having peers say in words and actions that they're o.k.
Being able to go places when they want to (i.e. having transportation readily available)
Having teachers find and stress their positive attributes while helping to eliminate and/or change their negative ones.

EXAMPLE #3: An Intervention for Elementary Teachers

STEP VI: List the actions that will help build the self-esteem of each person in this population.

Association with other teachers
Development of a healthy lifestyle through correct diet, exercise, and relaxation
Stress-management education

> Journal of School Health suggests that teachers need to be provided with information and skills to deal with occupational stress. (Belcastro & Gold, 1983)

Self-evaluation
Demonstration of a positive attitude toward self and others

> Purkey says self-confidence is 100 times more important than ability. (Radd, 1990)

STEP VII

LIST THE TYPES OF SUPPORT SYSTEMS (GROUPS, FAMILIES, COMMUNITIES, AND INDIVIDUALS), AND SPECIFY THE ROLE OF EACH, IN PROMOTING THE COPING, GROWTH, AND SELF-ESTEEM OF MEMBERS OF THIS POPULATION.

Social support is a vital element in the coping and self-esteem of an individual, and one's ability to develop and grow may depend on the nature of the social support that is present in his or her life. Berkowitz (1982) describes the nature and value of a personal social support network in the following.

> It sustains you, both passively and actively. To start with, it gives you security, just by being there, like money in the bank you never touch. More actively, it provides recognition; you are known as a person. It confers affirmation; you are worthwhile, a valuable person. People in your support system can extend task-oriented assistance ranging from watering the plants when you are away, to providing information on your legal rights, to offering cash payments when you are dead broke. They can give you emotional comfort when you need a sympathetic ear, or someone to guide you through a personal crisis. Your support system stimulates your participation in community life, by allowing you to express your competence, and by supplying you with chances to reciprocate the support you have received. And finally, your supports promote personal growth, by making it easier to take risks; you have the backing to try, the encouragement along the way, the approval if you succeed, the cushioning should you fail. (p. 6)

With these qualities, it may be beneficial to assess an individual's or group's social support network before beginning to plan an intervention. Maguire (1983) suggests a clinical way in which to analyze the support network of an individual. Begin by creating eight columns on a sheet of paper. Column 1 constitutes the names, addresses, and telephone numbers of persons in the individual's network. Column 2 is entitled "Relationship", and in it, the relationship of the person in Column 1 to the individual being studied is indicated. Column 3 is entitled "Willingness to Help", and here, the willingness of the person in Column to help is rated as "high", "medium" or "low". Column 4 is headed by the worked "Capabilities", and this refers to how able the person in Column 1 is to provide for the social/emotional needs of the individual being studied. Column 5 is entitled "Resources" and refers to what the person in Column 1 can contribute, either materially or in terms of contacts, to the individual being studied. Column 6 is for "Frequency of Contact", and in it, the terms "daily", "weekly", "bi-weekly", "monthly", etc., are used to describe how often the person in Column 1 interacts with the individual being studied. Column 7 refers to "Duration of Friendship", and it serves as a place to indicate, using terms such as "one month", "six months", "one year", "one to five years", etc., the duration of the relationship between the person in Column 1 and the individual being studied. Finally, Column 8 is entitled "Intensity", and it describes the "...degree of potential helpfulness or functionality and the degree of liking or affection that is felt toward the person" (Maguire, 1983, p. 77) in Column 1 by the individual being studied.

At times, the use of formal or informal support or mutual self-help groups may be appropriate. A general review of how to develop and facilitate support groups is contained in Dickel (1987). In addition, suggestions for support groups for teachers is found in Boytim and Dickel (1990). Completion of this step will assist in the development of goals, objectives, and procedures in STEP IX.

EXAMPLE #1: An Elementary School Intervention

STEP VII: List the types of support systems (groups, families, communities, and individuals), and specify the role of each, in promoting the coping, growth, and self-esteem of members of this population.

Support System	Role
1. Class meetings to provide discussion between peers about classroom or personal interactions	Problem solving
2. Significant Other Program (SO): Group meetings to identify with other adults within the school building	Advocacy
3. Field trips and/or guest speakers involving parents of the students in the classes	Promote Parental Involvement
4. Peer tutoring to promote interaction between students in other classes	Relationship/Academic skill building

EXAMPLE #2: A Secondary School Intervention

STEP VII: List the types of support systems (groups, families, communities, and individuals), and specify the role of each, in promoting the coping, growth, and self-esteem of members of this population.

Support System	Role
Teacher	Reflects respect, trust. Provides information.

School Counselor	Listens; Provides clarification, referral; Reflects trust.
School Nurse	Provides information, referral.
Police	Provides suggestions, information and directive.
Church	Provides clarification
Family	Provides reassurance, encouragement. Reflects respect and trust and unconditional access.
Neighbors	Distracts
"The System"	Provides information, referral. Intervenes.
Peer Group	Provides companionship, distracts.

EXAMPLE #3: An Intervention for Elementary Teachers

STEP VII: List the types of support systems (groups, families, communities, and individuals), and specify the role of each, in promoting the coping, growth, and self-esteem of members of this population.

Support System	Role
Family (spouse, parents, children, siblings)	emotions
Parents of students	problem-solving
Administrator	emotional, problem-solving. personal influence, environmental
Co-workers	-same-
Exercise group	encouragement
Lunch-room group	keep conversation positive reinforce positive behaviors
Buddy system	companionship, problem-solving

STEP VIII

SPECIFY TWO GOALS AND ACCOMPANYING OBJECTIVES FOR EACH OF THE FOLLOWING: (1) DECREASING THE ORGANIC FACTORS IN THIS POPULATION, (2) REDUCING THE STRESS FACTORS IN THIS POPULATION, AND (3) ELIMINATING THE EXPLOITATION IN THIS POPULATION. IN ADDITION, SPECIFY THE PROCEDURES THAT WILL BE USED TO ACHIEVE EACH GOAL AND OBJECTIVE.

The following questions appear on the planning form and provide the basis for this step: (1) What new behaviors or abilities would help the individuals in this population better

manage themselves under stress? (2) What can be done with individuals in this population to increase their positive evaluation of self? And, (3) What can be done to build a supportive network for each individual in this population? STEPS II, III, IV were completed with the intention of providing material to assist in the development of the goals, objectives, and procedures for this step.

EXAMPLE #1: An Elementary School Intervention

STEP VIII: Specify two goals and accompanying actions for each of the following: (1) decreasing the organic factors in this population, (2) reducing the stress factors in this population, and (3) eliminating the exploitation in this population. In addition, specify the procedures that will be used to achieve each goal and objective.

1. Decreasing organic factors (What can be done to eliminate the illnesses, illness producing behaviors, etc. that cause this population difficulties?):

Goal: To provide children with two nutritious meals for those who qualify and teach them what a nutritious meal is.

Objective: The learner will be provided with two meals a day; parents will be taught to fill out the appropriate forms and are made aware of services offered.

Objective: The learner will be provided with education on nutritious meals. They will be taught how to make healthy snacks.

Goal: To provide an exercise plan for children and teach the value of exercise in daily life.

Objective: The learner will develop specific coordination skills.

Objective: The learner will work cooperatively with others and will learn the value of working together to complete a task.

Procedures: Bring in a dietician and teach after school programs on nutrition and menus and will plan a menu of their own. The children will be making their own healthy snacks. The children will be involved in wellness group teaching such things as aerobics, exercise value, and learn to work together.

2. Reducing the stress factors (What can be done to reduce or eliminate the stressors that cause problems for this population?):

Goal: To promote an understanding of stressors in students' lives.

Objective: The students will identify people, places and events that are stressors in their own lives.

Objective: The students will identify their reactions to stressors and understand others will have similar responses.

Goal: To learn two main techniques for managing stress: progressive muscle relaxation and guided imagery.

Objective: The students will participate in guided imagery activities.

Objective: The students will participate in progressive muscle relaxation.

Procedures: The students will talk in small groups about what stress does to them. The students will be able to practice activities under leadership of the teacher and encouraged to practice these techniques outside the class setting. See Table 4 in Appendix A..

3. Eliminating the exploitation (What are the sources of use and/or abuse in this population, and how can these be eliminated?):

Goal: To enable the students to become more aware of the value of friendship and good decision making skills.

Objective: The students will learn to make friends and get along with others.

Objective: The students will have a sense of belonging by working cooperatively and sharing responsibility in completing a set task.

Goal: To empower the student so that they are aware of what abuse is and ways to protect themselves against abuse.

Objective: The students will gain an awareness of the forms of abuse; physical, verbal, emotional, sexual, and substance.

Objective: The students will list at least three sources where they can seek help if they are being abused.

Procedures: The students will role play problematic situations that are common to their age group, such as positive decision making skills and the value of getting along with one another. Cooperative learning groups throughout the year will also take place. The use of bibliotherapy which focuses on making friends using the "Boulder Gang" Series and Reading Rainbow series. Guest speakers using the program "Good Touch, Bad Touch" will be brought in. Other speakers will be the school nurse talking on physical abuse and using a local pharmacist, DARE officer, and physician taking on substance abuse. The school counselor will talk on emotional abuse. A judge will be invited to talk about what happens when child abuse is reported. The teacher will provide instruction on specific people who can offer support and protection in the case of abuse; minister, abuse hotline, school personnel, trusted neighbor, or a relative.

EXAMPLE #2: A Secondary School Intervention

STEP VIII: Specify two goals and accompanying actions for each of the following: (1) decreasing the organic factors in this population, (2) reducing the stress factors in this population, and (3) eliminating the exploitation in this population. In addition, specify the procedures that will be used to achieve each goal and objective.

1. Decreasing organic factors (What can be done to eliminate the illnesses, illness producing behaviors, etc. that cause this population difficulties?):

Goal: The students will recognize the negative effects substance abuse has on their lives.

Objective: Consequences of substance abuse will be discussed by the students with a knowledgeable facilitator.

Objective: Students will set up practical alternatives to substance abuse for themselves.

Goal: The students will develop a more healthy attitude toward their lives.

Objective: Students will take a nutrition class where they will develop and follow a nutritionally balanced diet.

Objective: Students will list the things that make them angry and acceptable means to release that anger.

Procedures: Students will participate in a class whose curriculum is developed around substance abuse and nutrition. Students will talk with a counselor, professional, about anger.

2. Reducing the stress factors (What can be done to reduce or eliminate the stressors that cause problems for this population?):

Goal: Students will increase his/her self esteem. (Leitenberg, 1977, p. 316.)

Objective: Students will list their good qualities.

Objective: Students will participate in esteem building activities

Goal: Students will reduce their geographic isolation.

Objective: Students will learn the MAT schedule.

Objective: Students will obtain a drivers' license.

Procedures: Students will participate in Drivers Training. Students will obtain and understand a MAT schedule. Students will understand what pulls them down.

3. Eliminating the exploitation (What are the sources of use and/or abuse in this population, and how can these be eliminated?):

Goal: Students will develop the technique of saying "no" when appropriate.

Objective: Students will be able to offer their peers alternatives to drug abuse.

Objective: Students will feel confident to express their opinions by practicing in small groups.

Goal: Students will use athletics as a positive influence in their lives.

Objective: Students will gain lifelong stress-reducing activities from athletics.

Objective: Students will participate in athletics if they choose. Students will be able to use athletics to relax.

Procedures: Small groups with a facilitator will be set up for students to express and gain confidence in their ideas. Students will participate in athletics to reduce stress.

EXAMPLE #3: An Intervention for Elementary Teachers

STEP VIII: Specify two goals and accompanying actions for each of the following: (1) decreasing the organic factors in this population, (2) reducing the stress factors in this population, and (3) eliminating the exploitation in this population. In addition, specify the procedures that will be used to achieve each goal and objective.

1. Decreasing organic factors (What can be done to eliminate the illnesses, illness producing behaviors, etc. that cause this population difficulties?):

Goal: The teachers will participate in some type of relaxation that will help to decrease their stress level.

Objective: The teachers will identify ways they relieve stress, then participate in those activities routinely, chart progress, and be rewarded.

Objective: The teachers will work towards individual and collaborative faculty goals.

Goal: The teachers will participate in cholesterol and blood pressure screenings to increase awareness and work toward more healthy lifestyles.

Objective: The faculty will demonstrate an awareness of their own health.

Objective: The faculty will demonstrate a willingness to improve personal health.

Procedures: A committee including volunteer teachers will help charting and providing incentives. The school nurse will do periodic screenings for faculty.

2. Reducing the stress factors (What can be done to reduce or eliminate the stressors that cause problems for this population?):

Goal: The teachers will have a more positive outlook about themselves.

Objective: The teachers will engage in daily journal writing using positive messages. (Hassan & Shrigley, 1985, p. 95)

Objective: The teachers will have access to stress-reducing literature (such as Prevention Magazine)

Goal: Teachers will gain a source of positive support.

Objective: Teachers will form buddy-systems to enhance each others' self-worth.

Objective: Teachers will provide encouragement and support by being aware of each others' needs.

Procedures: Teachers will utilize daily journal writing and stress-reducing literature and form support teams.

3. Eliminating the exploitation (What are the sources of use and/or abuse in this population, and how can these be eliminated?):

Goal: The teachers will accept their need for an understanding support group and will seek out people who can provide this. (Dickel, 1991)

Objective: Teachers will join with other teachers in a supportive environment.

Objective: Teachers will accept and support other teachers.

Goal: The teachers will accept the fact that some people are not able to be supportive of them, and will need to focus on finding others who can be. (Dickel, 1991)

Objective: The teachers will learn what their support needs are and will express those needs to others.

Objective: Teachers will be willing to seek support elsewhere.

Procedures: The teachers will join a support group for exercise and relaxation and through that, find support both professionally and personally.

STEP IX

SPECIFY TWO GOALS AND ACCOMPANYING OBJECTIVES FOR EACH OF THE FOLLOWING: (1) INCREASING THE COPING SKILLS OF THIS POPULATION, (2) BUILDING SELF-ESTEEM OF MEMBERS OF THIS POPULATION, AND (3) DEVELOPING APPROPRIATE SUPPORT GROUPS FOR THIS POPULATION. IN ADDITION, SPECIFY THE PROCEDURES THAT WILL BE USED TO ACHIEVE EACH GOAL AND OBJECTIVE.

The following questions appear on the planning form and provide the basis for this step: (1) What skills and attitudes can be developed in individuals in this population that will enable them to cope and grow in their life circumstance? (2) What can be done with individuals in this population to increase their positive evaluation of self? And, What can be done to build a supportive network for each individual in this population? STEPS V, VI, and VII were completed with the intention of providing material to assist in the development of the goals, objectives, and procedures for this step.

EXAMPLE #1: An Elementary School Intervention

STEP IX: Specify two goals and accompanying objectives for each of the following: (1) increasing the coping skills of this population, (2) building the self-esteem of members of this population, and (3) developing appropriate support groups for members of this population. In addition, specify the procedures that will be used to achieve each goal and objective.

1. Increasing the coping skills of this population(What new behaviors/abilities would help individuals in this population better manage themselves under stress?):

Goal: To learn appropriate social skills in order to deal with day to day social situations.

Objective: The students will be introduced to a new social skill each month from the Boys Town Model adapted by Edison School.

Objective: The students will apply the new monthly skill through role playing opportunities.

Goal: The students will be given the opportunity to practice decision making skills.

Objective: The students will be provided with a list of activity options and opportunities to choose during leisure time.

Objective: The students will be given the opportunity to plan the day's schedule of events.

Procedures: The teacher will introduce a new skill monthly and children will practice the skill throughout the month. The students will be provided with opportunities to role play situations.

2. Building the self-esteem of members of this population (What can be done with the individual in this population to increase his/her positive evaluation of self?):

Goal: To know and understand self in terms of strengths and weaknesses.

Objective: The student will gain an awareness and acceptance of his/her personal uniqueness.

Objective: The students will gain an awareness of the uniqueness of others.

Goal: To change the way one feels about one's self by using positive self-talk.

Objective: The students will be aware of negative feelings and self talk that can inhibit positive self-esteem.

Objective: The student will learn to use specific positive self-talk, such as "I can" statements.

Procedures: Bibliotherapy – "The Little Engine That Could."
Positive affirmation from peers, teacher led activities.
Counselor led positive and negative self-talk during classroom guidance lessons. Use the Michelle & Craig Bourba Self-Esteem: A Classroom Affair program ideas throughout the year.

3. Developing appropriate support groups for members of this population (What can be done to build a supportive network for each individual in this population?):

Goal: The student will be assigned to a caring adult within the school building as an alternative to the classroom teacher.

Objective: The student will participate in a significant other program involving the entire school population.

Objective: The student will develop a personal relationship with member(s) of their S. O. group.

Goal: Provide students with an opportunity to share feelings and experiences within a group setting.

Objective: The students will have the opportunity to share during lunch, feelings and experiences with each other, S. O. groups, and classroom teacher.

Objective: The students will have classroom meetings to share during designated time of the week -- called "Edison Rap."

Procedures: Bi-monthly 20 minute meetings to participate in activities designed by the S. O. leader. Provide lunch meeting times for children to share and weekly rap time for children to share.

EXAMPLE #2: A Secondary School Intervention

STEP IX: Specify two goals and accompanying objectives for each of the following: (1) increasing the coping skills of this population, (2) building the self-esteem of members of this population, and (3) developing appropriate support groups for members of this population. In addition, specify the procedures that will be used to achieve each goal and objective.

1. Increasing the coping skills of this population(What new behaviors/abilities would help individuals in this population better manage themselves under stress?):

Goal: Students will increase their communication skills.

Objective: Students will learn how communication can positively affect their lives.

Objective: Students will be able to express their feelings appropriately.

Goal: The students will develop decision-making skills.

Objective: Given situations, students will list appropriate alternatives.

Objective: Given alternatives, students will choose the most appropriate one for them.

Procedures: Student will participate in decision-making activities. Student will participate in a small group where feelings is the direction.

2. Building the self-esteem of members of this population (What can be done with the individual in this population to increase his/her positive evaluation of self?):

Goal: Student will earn enough credits to pass/graduate.

Objective: Students will take and pass the classes required for promotion.

Objective: Students will use problem solving techniques in their daily lives.

Goal: Students will develop employability skills.

Objective: Student will accurately fill out job applications.

Objective: Students will learn qualities needed to keep employment.

Procedures: Students will practice filling out job applications. Students will practice interviews. Students will roleplay the boss-employee situation. Students will participate in study skills to enhance their academic ability.

3. Developing appropriate support groups for members of this population (What can be done to build a supportive network for each individual in this population?):

Goal: Students will obtain knowledge of their school family.

Objective: Students will visit their counselor.

Objective: Students will visit the school nurse.

Goal: Student will learn, accept, societal influences for their positive attributes.

Objective: Student will see the police as helpers.

Objective: Student will see the need for the church.

Procedures: Police officer(s) will visit with students 1 to 1 and in small groups in school and non-school setting. Ministers will visit with students. Students will be allowed to see their counselor on a regular basis and as needed. The Nurse will talk with the students in small groups.

EXAMPLE #3: An Intervention for Elementary Teachers

STEP IX: Specify two goals and accompanying objectives for each of the following: (1) increasing the coping skills of this population, (2) building the self-esteem of members of this population, and (3) developing appropriate support groups for members of this population. In addition, specify the procedures that will be used to achieve each goal and objective.

1. Increasing the coping skills of this population(What new behaviors/abilities would help individuals in this population better manage themselves under stress?):

Goal: Teachers will develop a knowledge of the need for coping skills and strategies needed in the school setting.

Objective: Teachers will develop an understanding of what coping is and how to use it in their life.

Objective: Teachers will evaluate and monitor their own use of coping skills and encourage co-workers to improve coping.

Goal: Teachers will develop a positive attitude towards coping and increase their use of coping strategies.

Objective: Teachers will practice positive self-talk, relaxation, exercise, leisure activities, and optimistic attitudes.

Objective: Teachers will seek help in improving their skills in decision-making, assertiveness, time-management, etc.

Procedures: Teachers will assess their own coping by completing a coping inventory and set a goal for themselves to master and increase their use of strategies while monitoring the use of identified strategies periodically.

2. Building the self-esteem of members of this population (What can be done with the individual in this population to increase his/her positive evaluation of self?):

Goal: The teachers will display improved self-confidence and enthusiasm about themselves and others.

Objective: The teachers will join a teacher support group set up according to the Dickel and Boytim model (Dickel, 1991, p. 93)

Objective: The teachers will be reinforced for participation in a support group.

Goal: Teachers will involve themselves and their students in self-esteem activities.

Objective: The teachers will intentionally invite self-esteem promoting activities.

Objective: Teachers will master teaching self-esteem enhancement.

Procedures: Teachers will seek ways to teach self-esteem promotion. Support groups will be available to teachers.

3. Developing appropriate support groups for members of this population (What can be done to build a supportive network for each individual in this population?):

Goal:

Same as Step VIII, number 3
and Step IX, number 1

Objective:

Objective:

Goal:

Objective:

Procedures: "These support groups should enable the staff to approach their duties as educators with enthusiasm and with the knowledge that support among peers is available at all times" (Dickel, 1991, p. 94).

Purkey (1970)in Individual Education feels that it is necessary to model appropriate behavior.

STEP X

EXPLICATE A STRATEGY FOR THE EVALUATION OF THIS PRIMARY PREVENTION PLAN AND FOR FOLLOW-UP WITH MEMBERS OF THIS POPULATION

The current shortage of funds for most social service and preventive programs makes the ability of those programs to prove their effectiveness an absolute necessity, and the final step to planning is the development of a strategy by which the outcome of the prevention intervention can be evaluated. Whether the concept is "outcome-based intervention" or the old idea of "accountability", no plan is complete unless provisions are made to demonstrate effectiveness.

The effectiveness of a plan can be observed at numerous levels. Lorion (1983) points out that an intervention can have an impact on individuals, on interpersonal relationships, on institutions, and/or on the system. The question for evaluation is: How will the members of the specified population be different following the full implementation of this primary prevention plan? In addition, the planner(s) may want to consider changes in interpersonal relations, changes in the institution, and changes in the system of which the institution is a part, all as a result of the implemented intervention.

Lastly, there is a need to develop a follow-up plan for this intervention. Once the intervention is complete, the question remains: How will the changes that result at all levels continue to remain in existence? The concern is with providing periodic evaluation, motivation, and re-training that will insure the continuing effects of the original intervention. It could be that the changes will immediately become ingrained, but more than likely, they will need help with becoming established. At specified intervals following the initial intervention, the planning team should re-evaluate the changes that have occurred and be prepared with strategies to further establish the desired changes.

EXAMPLE #1: An Elementary School Intervention

STEP X. Specify how you will evaluate the success of this intervention program and how you will follow-up with members of this population..

In terms of individual impact, students will indicate their feelings daily by the use of a 2-sided paper face, smiling & frowning on their desk. The teacher and/or student could chart differences on a daily basis (i.e. 9:00 a.m. Monday: 9 frowns, 12 smiles; 2:00 p.m. Monday: 2 frowns, 19 smiles). Follow-up to this could be a daily or weekly large group discussion of what caused the smiles and frowns. Notes can be taken pertaining to students' responses. (i.e. days of S. O. groups, all smiles?! "I was hungry" [organic factors], frown.)

In terms of interpersonal impact, the teachers' anecdotal records will indicate improved interactions between students. The specific monthly social skills taught that month may be the target error for the month.

Begin with a pretest measurement in the form of a sociogram. Where children are asked questions such as, "Who's your best friend? Who do you want to work with? Name four children you would like to work with in a pod."

After the intervention has taken place do a post-test using the same measurement. Hopefully the final sociogram will all have a change.

EXAMPLE #2: A Secondary School Intervention

STEP X. Specify how you will evaluate the success of this intervention program and how you will follow-up with members of this population..

In intrapersonal evaluation, the student will be able to talk about himself/herself in positive terms. The student will pass/graduate.

In interpersonal evaluation the number of referrals to the office dealing with interpersonal relationships will be counted.

In institutional evaluation the school's graduation rate will increase.

In system evaluation the crime rate will go down. The social welfare system rolls will decrease. Tax dollars will be freed up for other projects OR taxes will be lowered!

EXAMPLE #3: An Intervention for Elementary Teachers

STEP X. Specify how you will evaluate the success of this intervention program and how you will follow-up with members of this population..

Individual -- Teachers will complete a pre- and post-test coping inventory and become involved in supportive activities.

Interpersonal -- Teachers will report improved communication, cooperation, health habits and job-satisfaction

Institutional -- A positive working and learning environment will be evident.

System -- Administrators will report improved teacher effectiveness and staff support. Parents will report improved self esteem with their children.

Conclusion

The ten-step model for creating a preventive school represents a systematic way of addressing the problems and concerns of the local school. It is a strategy and process by which all persons involved in the school can recognize elements associated with sound mental health and then plan and implement locally relevant strategies to promote mental health within their school. This process is intended to empower the school community to tackle the mental health needs of their building and to do so with knowledge and confidence. It is the hope of these writers this process will enable children, teachers, staff, parents, and administrators to work together toward a school environment that is proactive and which eliminates organic factors, stress, and exploitation and which enhances coping skills, self-esteem, and support groups.

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Appendix A:
Additional Material from
Burchette, Collins, Hartman, and McNeal (1991)

TABLE 4: PROGRESSIVE MUSCLE RELAXATION TRAINING SCRIPT*

*Cautela, J.R., & Groden, J. (1978). Relaxation: A comprehensive manual for adults, children, and children with special needs. Champaign, IL: Research Press (pp. 22-30).

Instructions: When you feel tense, upset, or nervous, certain muscles in you body tighten. By having you deliberately tense certain muscles in your body, you will learn to identify the muscles that are tight; then you learn to relax them. Practice tightening and relaxing the following muscle groups.

Forehead
Wrinkle up you forehead. Point to where it feels particularly tense (over the bridge of the nose and above each eyebrow). Slowly relax your forehead and pay special attention to those areas that are particularly tense. Spend a few seconds noticing how it feels to have those muscles loosen, switch off, and relax. Notice the difference in how the muscles feel.

Eyes
Close your eyes very tightly. Point to where it feels tight. Your eyes should feel tense above and below each eyelid and on the inner and outer edges of the eye. Pay particular attention to those areas that are especially tense. Gradually relax your eyes as you open them slowly. Notice the difference in the way the muscles feel.

Nose
Wrinkle your nose. Point to the areas that feel tight (the bridge and nostrils). Pay special attention to those areas that are particularly tense. Gradually relax your nose slowly, letting all the tension out. Notice how it feels to have those muscles loosen, switch off, then fully relax. Notice the difference in the way the muscles feel.

Smile
Put your mouth and face in a forced smile. Point to the areas that feel tense (the upper and lower lips and cheeks on each side). Your lips should be hard against your cheeks. Gradually relax your face. Notice how it feels to have those muscles loosen, switch off, and relax.

Tongue
Put your tongue hard against the roof of your mouth. Point to where it feels tense (on the inside of the mouth and tongue, and the muscles just below the jaw). Slowly relax those muscles by letting your tongue gradually fall to the floor of your mouth. Pay special attention to those areas that are particularly tense. Notice how it feels to have those muscles loosen, switch off, and relax. Notice the difference in the way the muscles feel.

Jaw
Clench your teeth. Point to where it feels tense (the muscles on the side of your face and also the temples). Gradually relax your jaw and feel the sensation of letting go. Notice how it feels to have those muscles loosen, switch off, and relax. Notice the difference in the way the muscles feel.

Lips
Pucker your lips. Point to where it feels tense (upper and lower lips and side of lips). Pay special attention to those areas that are particularly tense. Gradually relax your lips. Notice how it feels to have those muscles loosen, switch off, and relax. Notice the difference in the way the muscles feel.

Neck
Tighten your neck. Point to where it feels tense (Adam's apple and on each side and the back of the neck). Pay special attention to those areas that are particularly tense. Gradually relax your neck. Notice how it feels to have those muscles loosen, switch off, and relax. Notice the difference in the way the muscles feel.

Arms
Put your right arm out straight, make a fist, and tighten your whole arm from your hand to your shoulder. Point to where it feels tense (biceps, forearm, back of arm, elbow, above and below wrist and fingers). Pay special attention to those areas that are particularly tense. Gradually relax and lower your arm, bending it at the elbow; relax so that your arm is resting on your lap in the relaxing position. Notice how it feels to have those muscles loosen, switch off, and relax. Notice the difference in the way the muscles feel. Repeat with the left arm.

Legs
Now lift your left leg, turn your toes in towards you, and tighten your whole leg. Point to where it feels tight (top and bottom sides of thigh, knee, calf, front and back of arch, and toes). Gradually relax and lower your leg until your foot is squarely on the floor, bending your knee as you relax. Make sure your leg goes back to the relaxing position. Notice the difference in the way the muscles feel. Repeat with the right leg.

Back
Move forward in your chair. Bring your elbows up and try to get them to meet in the back. Notice where it feels particularly tense (shoulders and down the middle of your back). Gradually relax by moving back into the chair while you straighten out your arms and put them on your lap in the relaxing position. Notice how it feels to have those muscles loosen, switch off, and relax.

Chest
Tighten your chest. Try to constrict it or pull it in. Point to where it feels tense (middle of the chest and above and below each breast). Gradually relax your chest. Notice how it feels to have those muscles loosen, switch off, and relax. Notice the difference in the way the muscles feel.

Stomach
Tighten your stomach by pulling it in and making it as hard as a board. Point to where it feels tense (navel and circle around navel encompassing about 4 inches in diameter). Gradually relax your stomach to its natural position. Notice how it feels to have those muscles loosen, switch off, and relax. Notice the difference in the way the muscles feel.

Below the waist
Tighten everything below the waist, including your thighs and buttocks. You should feel yourself rise from the chair. You may notice that you have to tighten your legs a bit. Notice where it is particularly tense (top, bottom, and sides of thighs; muscles from the rear that make contact with the chair). Gradually relax and move back in your chair. Notice the difference in the way the muscles feel.

TABLE 4: THEMATIC IMAGERY SCRIPT •

• Smith, J.C. (1989). Relaxation Dynamics: A Cognitive-Behavioral Approach to Relaxation. Champaign, IL: Research Press (pp. 167-169).

Instructions: In this exercise we are going to relax by letting our minds dwell on a relaxing scene or setting.

PAUSE

Make sure you are in a comfortable position.

PAUSE

Are your hands resting comfortably in your lap?

PAUSE

Now gently close your eyes and let yourself settle into a position that is comfortable.

PAUSE

For the next minute or so, your body becomes more and more quiet.

PAUSE 1 MINUTE

Let yourself begin to settle down and relax as you remain still.

PAUSE

Now attend to your body.

PAUSE

Let your breathing be calm and even.

PAUSE

Let every outgoing breath carry away any tension you might feel.

PAUSE

Let yourself feel more and more comfortably relaxed.

PAUSE

And now quietly ask yourself, "What scene or setting is most relaxing to me at the moment?"

PAUSE 10 SECONDS

You might want to picture a quiet beach, or a grassy plain, or a cool mountain top, or a peaceful pond. Whatever scene or setting is most relaxing to you, let it come to you in whatever way it wishes.

PAUSE 10 SECONDS

And now, quietly let your mind dwell on this scene for the next few seconds.

PAUSE 15 SECONDS

Let the scene become as vivid and real as possible.

PAUSE

Quietly and gently return to your relaxing scene.

PAUSE 15 SECONDS

Let yourself sink deeper and deeper into a pleasant state of relaxation.

PAUSE

From time to time, let yourself quietly repeat whatever words or pictures suggest deeper, more complete, and more satisfying relaxation.

PAUSE

You might think the words "I am sinking deeper and deeper" or "I am letting go more and more" or "There is nothing for me to do but let go" or "I am more fully aware."

PAUSE

Let the deepening suggestions come to you in whatever way feels most satisfying and relaxing.

PAUSE 10 SECONDS

Again and again, every time your mind wanders or is distracted, return to your pleasant, relaxing scene.

PAUSE

Continue attending to your scene for the next few minutes. See where it leads you. See how it deepens. See how it grows and becomes more relaxing.

PAUSE 2 MINUTES

And now, very gently let go of what you are attending to.

PAUSE 5 SECONDS

When you are ready, gently open your eyes.

PAUSE 5 SECONDS

Take a deep breath.

PAUSE 5 SECONDS

And stretch.

PAUSE 5 SECONDS

This completes the thematic imagery exercise.

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Appendix B:
Additional Material from Brown (1991)

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Appendix C:
Additional Material from Groff, Byrd, and Pfeffer (1991)

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